PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

10/538986

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
		···	(Columi	n 1)	. ((Cotumn 2)		TYPE		OR:	SMALL E	NTITY
U.S. NATIONAL STAGE FEES				٠.	,		1	RATE	FEE		RATE	FEE .
BASIC FEE			SMALL ENT.	= \$ 150	LARG	SE ENT. = \$.300	7	BASIEFEE	150	'OŖ	BASICHEE	
EXAMINATION FEE			Satisfies PCT A (4) = \$50	/\$ 100		her situations = 100 / \$ 200		数温度的	100		WAR LEB	
SEARCH FEE			U.S. is ISA = \$ ALL other cou . \$ 200 / \$	intries =		ner situations = 250 / \$ 500		SEARCH FEE	200		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			mini	ıs 100 =		/ 50 =		X\$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			26 mir	nus 20 =	• . (6		X \$ 25 =	150	OR	X \$ 50 =	
INDEPENDENT CLAIMS			14 m	lnus 3 =	• 1	•		x \$ 100 =	100	OR	X \$ 200 =	
MULTIPLE DEPENDENT CLAIM PRESENT							+ \$ 180 =		OR	+\$ 360 =		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II 6 - 5 - 6 Gotumn 1) (Column 2) (Column 3)						·	SMALL E	INTITY	OR	OTHER SMALL E		
AMENDMENT A	,	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	<i>/</i> .	RATE	ADDI- TIONAL FEE
	Total	· 20:	Minus	-20	l. D.	=		X \$ 25 =	1	OR	X \$ 50 =	
	Independent	• 4	Minus	···· /]	=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 380 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	· .	(Column 1)	· ·	(Colun	าก 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID I	BER USLY	PREȘENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		8		X \$ 25 =	:	OR	X \$ 50 =	
	Independent	•	Minus -	***				X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
	•							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	• • •		•					•		•		
	. If the entry in colur	nn 1 is tess than the	entry in column 2	2. write "0" ir	s cotimo	3.			•			.
**	If the "Highest Nur	mber Previously Pal mber Previously Pai	d For IN THIS SP	ACE Is less	than 20	, enter "20".						
		ber Previously Paid					d in th	e appropriate box	in column 1.			
												414-14